## REVIEW OF RISK COMMUNICATION AND COMMUNITY **ENGAGEMENT INITIATIVE FOR**

# COVID-19 PREVENTION BEHAVIOURS IN CAMBODIA

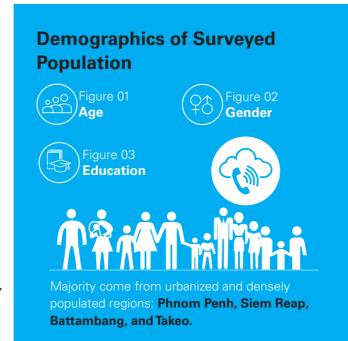
## **Background on RCCE and online** survey

Responding to the COVID-19 pandemic, UNICEF Cambodia Country Office (CO) has provided a leading role in production of RCCE assets, under the guidance of the Ministry of Health and in close collaboration with the World Health Organization and other partners. RCCE assets for spreading messages on preventive behaviors span from posters, TV spots, radio spots, banners and billboards, as well as social media.

An online and phone survey that launched in April collected

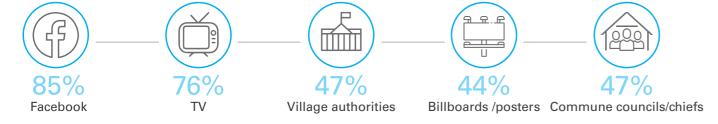


responses from people across the country<sup>1</sup> and provides an insight on how people are access information on the virus, understand its risks, and act to protect them selves and others from the virus.2



### Information Channels Used

Top 5 information channels and sources for receiving information about COVID-19:



However, the data shows that people may not trust messages from the channels they use the most.

### Figure 05 Education level corresponds with sources of

information used:

Those using channels that may require reading skills—e.g



are more educated.







Facebook

chiefs and village authorities had lower levels of education, were older (> 50 v/o and above)

and more likely to trust these information sources.



Those receiving messages through commune

## **Attitudes towards Preventive Actions**



## Perceived Effectiveness of preventive action in preveng the spread of coronavirus, include percentages for 66 yery effective on



**Avoiding crowds:** 76%



Thorough cooking of food:



Safe distance:



Cover cough:





Handwashing:



Not touching face:

Respondents believe that preventive actions are generally very effective, inaction will lead to severe risks, and overall precautions will help to reduce the risks.

The more that people view preventive actions as effective, the more people also believe that overall precautions can lower the risk of infection.



Respondents believe that risks can be significantly reduced if precautions are taken



Older people (60+) may be more willing to take precaution because they believe it can significantly reduce their risk of contracting the virus.

### **Use of Preventive Behaviors**



Thoroughcooking of food: 94% practice frequently





Handwashing: 75% practice frequently



Cover cough: 72% practice frequently



**Avoiding crowds:** 52% practice frequently



Sneeze into elbow: 51% practice frequently



Not touching face: practice frequently

<sup>&</sup>lt;sup>1</sup>The online survey collected 500 responses from people across the country. Additionally, a phone survey collected responses from 250 UNICEF beneficiaries of the Mine Risk Education programme and Positive Parenting Programme

<sup>&</sup>lt;sup>2</sup>Small sample size; responses do not reflect vulnerable groups; data biased towards urban, educated and connected individuals 3 who follow social media; observed behavioral changes cannot be attribute to public messages/RCCE alone.

Frequently performed actions have 3 key features: they are easy to perform individually; do not depend on a person's living context (e.g. rural vs. city); and do not require social compliance to be effective for the individual.

The more that an individual believes an action to be effective, the more likely they are to perform that behavior.



80% of respondents said that they practice preventive actions due to public messaging

#### Lessons learned

Not all of the actions were practiced with the same frequency. The impact of RCCE can be strengthened by accounting for the web of factors shaping peoples' ability and inclination to perform individual behaviors.

The important but underutilized relationship between risk perceptions, perceived effectiveness of preventive actions, and frequency of practiced behaviors can be used in developing more impactful RCCE messages.

Information on the social importance and feasibility of actions may help promote the use of the recommend behaviors. RCCE messages can also provide context-specific guidance on how behaviors might be possible in various kinds of circumstances, such as in cities vs. rural environments.



Broad-scale behavioral change also requires additional development interventions. For the those whose livelihoods depend on contact with others (48% respondents),



and those who are unable to access both soap and clean water (12%), public messaging alone will not increase the frequency of the preventive actions.

## **Key recommendations:**

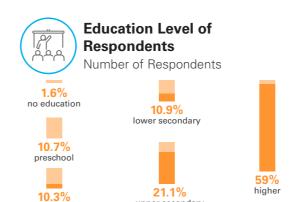
Strategize on messages that emphasize the effectiveness of recommended behaviors as well as the reduced risks of contracting coronavirus through these actions.

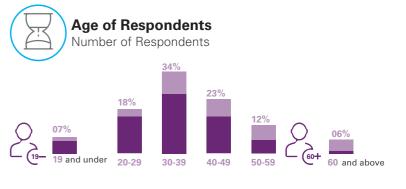
Increase frequency of messaging, particularly for reflex behaviors such as avoiding touching one's face and sneezing into the elbow. Promote preventative behaviors by highlighting the social importance and feasibility of the actions.

Expand the use of non-literary messages, through the support of local leaders, and the use of audio and visual messaging to reach more people and encourage the use of all preventative actions.

## Partnership support

UNICEF coordinates closely with the Ministry of Health, MoEYS, MoSVY, Ministry of Cults and Religion, Ministry of Interior, as well as Centre for Disease Control Cambodia, the Cambodian Institute for Health Promotion, WHO Cambodia and relevant international and local NGOs. Many thanks to the generous financial support of our donors including United States Agency for International Development (USAID), Government of Japan, and the Danish International Development Agency (Danida). UNICEF is grateful to partners such as SMART, Facebook Cambodia, Cellcard, European Chamber of Commerce, the Chief Executive of the Municipality of Phnom Penh, and other development counterparts and civil society organizations in Cambodia.

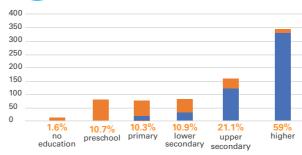


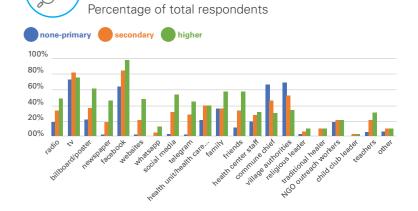




# Education Level of Respondents

Number of Respondents





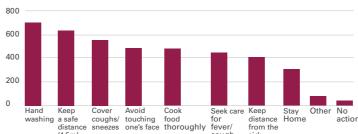
Source of Information on COVID-19

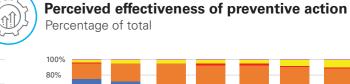
by Highest Level of Education

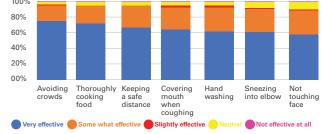


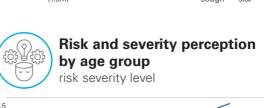
# Main Messages Learned from Sources of Information

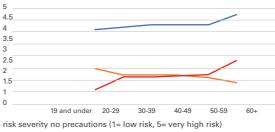
Number of Respondents











risk severity no precautions (1= low risk, 5= very high risk)
risk severity with precautions (1= low risk, 5= very high risk)
extent to which precautions reduce risk (1 unit= 1level of risk reduced by
taking precautions)

